Case 20-10733-KHK Doc 16 Filed 03/31/20 Entered 03/31/20 13:00:20 Desc Main Document Page 1 of 36

			1 0.310 = 0.00	
Fill in this info	rmation to identify your	case:		
Debtor 1	Jamil M Ezzeddin	e		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number	20-10733			
(if known)				☐ Check if th amended f

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

you	r original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	370,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	19,050.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	389,050.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	418,593.06
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	6,700.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	6,475.37
	Your total liabilities	\$	431,768.43
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,719.75
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,745.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,700.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	6,700.00

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Fill in this information to identify you	Document	Page 3 of 36			
- III III III III III III III III III I	r case and this filing:				
Debtor 1 Jamil M Ezzeddi					
First Name  Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:	EASTERN DISTRICT OF VIRO	SINIA			
Case number <b>20-10733</b>		_			Check if this is an amended filing
Official Form 106A/B Schedule A/B: Property of the state	be items. List an asset only once. It	f an asset fits in more than one	category, list the	asset in the	12/15
Answer every question.  Part 1: Describe Each Residence, Buildin  Do you own or have any legal or equitab  No. Go to Part 2.  Yes. Where is the property?	g, Land, or Other Real Estate You C				
1.1					
7095 Leewood Forest Drive Street address, if available, or other description	Single-family  Duplex or m	rty? Check all that apply y home ulti-unit building m or cooperative	the amount of an	y secured cla	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
7095 Leewood Forest Drive  Street address, if available, or other description	Single-family Duplex or m Condominiu  Manufacture  151-0000  ZIP Code Investment p Timeshare	y home ulti-unit building m or cooperative ed or mobile home	Current value of entire property? \$370,00  Describe the nate	y secured cla ave Claims S the C p 10.00	aims on Schedule D: Secured by Property.  Current value of the portion you own? \$370,000.00
7095 Leewood Forest Drive Street address, if available, or other description  Springfield VA 22	Single-family Duplex or m Condominiu  Manufacture  151-0000  ZIP Code Investment p Timeshare Other	y home ulti-unit building m or cooperative ed or mobile home property  st in the property? Check one	Current value of entire property? \$370,00  Describe the nate	y secured claims so the Claims	aims on Schedule D: Secured by Property.  Current value of the portion you own?  \$370,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Deb	Jamii M Ezzeddine		ase number (ir known)	20-10733
3. <b>C</b>	ars, vans, trucks, tractors, sport utility ve	ehicles, motorcycles		
П	No			
_	No			
	Yes			
			D (11)	
3.1	Make: Infiniti	Who has an interest in the property? Check one		ed claims or exemptions. Put ecured claims on <i>Schedule D</i> :
	Model: <b>G35</b>	Debtor 1 only		Claims Secured by Property.
	Year: <b>2003</b>	Debtor 2 only	Current value of th	e Current value of the
	Approximate mileage: 160000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	Location: 7095 Leewood Forest		<b>***</b>	
	Drive, Springfield VA 22151	☐ Check if this is community property (see instructions)	\$2,000.	\$2,000.00
3.2	Make: <b>GMC</b>	Who has an interest in the property? Check one		ed claims or exemptions. Put
	Model: Arcadia	■ Debtor 1 only		ecured claims on Schedule D: Claims Secured by Property.
	Year: <b>2008</b>	Debtor 2 only		
	Approximate mileage: 123,000	Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another	chare property.	portion you own.
	Location: 7095 Leewood Forest	At least one of the debtors and another		
	Drive, Springfield VA 22151	Check if this is community property (see instructions)	\$10,000.	\$10,000.00
.p		vn for all of your entries from Part 2, including a that number here		\$12,000.00
Do y	you own or have any legal or equitable ir	terest in any of the following items?		Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
6. <b>H</b>	ousehold goods and furnishings			ciains of exemptions.
E	Examples: Major appliances, furniture, linens No	s, china, kitchenware		
	Yes. Describe			
	Dining Oct. Tel	In Oheira Bada Brassers TV		
		oles, Chairs, Beds, Dressers, TV,		
		ıfas, Lamps, Living Room room Furniture, Small		
		oon Furniture, Small		\$4,250.0
	Household App			
	lectronics			
Е				
_	including cell phones, cameras, r	leo, stereo, and digital equipment; computers, print	ers, scanners; music co	lections; electronic devices
	No	leo, stereo, and digital equipment; computers, print	ers, scanners; music co	lections; electronic devices
	_	leo, stereo, and digital equipment; computers, print	ers, scanners; music co	lections; electronic devices
. ^	Yes. Describe	leo, stereo, and digital equipment; computers, print	ers, scanners; music co	lections; electronic devices
	Yes. Describe	leo, stereo, and digital equipment; computers, print	ers, scanners; music co	lections; electronic devices
	Yes. Describe ollectibles of value	leo, stereo, and digital equipment; computers, print nedia players, games		
	Yes. Describe  ollectibles of value  examples: Antiques and figurines; paintings,	leo, stereo, and digital equipment; computers, print nedia players, games  prints, or other artwork; books, pictures, or other a		
	Yes. Describe  ollectibles of value  examples: Antiques and figurines; paintings, other collections, memorabilia, co	leo, stereo, and digital equipment; computers, print nedia players, games  prints, or other artwork; books, pictures, or other a		
	Yes. Describe  ollectibles of value  examples: Antiques and figurines; paintings,	leo, stereo, and digital equipment; computers, print nedia players, games  prints, or other artwork; books, pictures, or other a		

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DC	Janni W Ezzedune Case number (# Khow	20-10/33
9. <b>E</b>	Equipment for sports and hobbies  Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe musical instruments	s and kayaks; carpentry tools;
	■ No	
	Yes. Describe	
10.	Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
	■ No	
I	☐ Yes. Describe	
11.	. Clothes	
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  ☐ No	
	■ Yes. Describe	
	Debtors' Clothing	\$650.00
12.	<ul> <li>Jewelry         Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems     </li> </ul>	gold, silver
ı	□ No	. 0 - 1, 1
	Yes. Describe	
	Rings, Wedding Ring	\$200.00
	3-7 3 3	
13.	. Non-farm animals	
	Examples: Dogs, cats, birds, horses	
	■ No	
	Yes. Describe	
	. Any other personal and household items you did not already list, including any health aids you did not list ☐ No	
	■ Yes. Give specific information	
	— Test. Give specific information	
	Books, Pictures, Small	\$120.00
	Household Items	Ψ120.00
15.	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	<b>↑</b> 5 000 00
	for Part 3. Write that number here	\$5,220.00
	art 4: Describe Your Financial Assets o you own or have any legal or equitable interest in any of the following?	Current value of the
DU	byou own or have any legal or equitable interest in any or the following:	portion you own?
		Do not deduct secured
4.0		claims or exemptions.
16.	Cook	claims or exemptions.
	. Cash  Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet	·
	<i>Examples</i> : Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet ☐ No	·
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet	·
	<i>Examples</i> : Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet ☐ No	·
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  □ No  ■ Yes	ition
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  No Yes	s30.00
	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  No  Yes	s30.00
17.	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  No Yes	s30.00
<b>17</b> .	Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your pet  □ No  □ Yes.  Cash  Deposits of money  Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage institutions. If you have multiple accounts with the same institution, list each.	ition \$30.00

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Case number (if known) 20-10733 Debtor 1 Jamil M Ezzeddine 17.1. Checking Account PNC \$1,800.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. .... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own?

Official Form 106A/B Schedule A/B: Property page 4

Do not deduct secured claims or exemptions.

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D	ebtor 1	Jamil M Ezzeddine	Case number (if known	n) <b>20-10733</b>
28	Tax ref	funds owed to you		
	■ No	,		
	☐ Yes.	Give specific information about them, including wl	hether you already filed the returns and the tax years	
20	Family	support		
23			ort, child support, maintenance, divorce settlement, proper	rty settlement
	■ No			
	☐ Yes.	Give specific information		
30		amounts someone owes you	Park Physics and Physics and American Community and American Communi	and the Oraclet Occupies
	Examp	benefits; unpaid loans you made to someone	s, disability benefits, sick pay, vacation pay, workers' compeeelse	bensation, Social Security
	■ No			
	☐ Yes.	Give specific information		
31	Interes	sts in insurance policies		
0.			vings account (HSA); credit, homeowner's, or renter's insur	rance
	■ No			
	☐ Yes.	Name the insurance company of each policy and Company name:		Surrender or refund
		Company hame.	Beneficiary:	value:
22	A ny int	terest in property that is due you from someon	as who has died	
32			ds from a life insurance policy, or are currently entitled to re	eceive property because
		one has died.		
	■ No	Cive energific information		
	☐ Yes.	Give specific information		
33	Claims	against third parties, whether or not you have	e filed a lawsuit or made a demand for payment	
-		oles: Accidents, employment disputes, insurance of		
	■ No			
	☐ Yes.	Describe each claim		
34	Other of	contingent and unliquidated claims of every na	ature, including counterclaims of the debtor and rights	to set off claims
	■ No			
	☐ Yes.	Describe each claim		
35	Any fin	nancial assets you did not already list		
	■ No			
	☐ Yes.	Give specific information		
_				
36			4, including any entries for pages you have attached	\$1,830.00
Pa	art 5: De	scribe Any Business-Related Property You Own or H	ave an Interest In. List any real estate in Part 1.	
37	Do you d	own or have any legal or equitable interest in any bus	siness-related property?	
31.	_ `	to to Part 6.	siness-related property:	
	_	Go to line 38.		
		20 10 1110 001		
Pa		scribe Any Farm- and Commercial Fishing-Related Portion own or have an interest in farmland, list it in Part 1.	roperty You Own or Have an Interest In.	
46			any farm- or commercial fishing-related property?	
		Go to Part 7.		
	⊔ Yes	s. Go to line 47.		
		Describe All Branesty Vou Own or Have an Interest		
		= Dagarika Ali Dramarki, Vali Olim ar Haila an Intarast	un Ibat Vau Did Nat Liet Abaya	

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Debtor 1 Case number (if known) 20-10733 Jamil M Ezzeddine 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$370,000.00 Part 2: Total vehicles, line 5 \$12,000.00 Part 3: Total personal and household items, line 15 57. \$5,220.00 Part 4: Total financial assets, line 36 \$1,830.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 61. Total personal property. Add lines 56 through 61... Copy personal property total \$19,050.00 \$19,050.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$389,050.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info	ormation to identify your	case:	./	
Debtor 1	Jamil M Ezzeddir	ne		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number	20-10733			
(if known)				

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt
1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
7095 Leewood Forest Drive Springfield, VA 22151 Fairfax County	\$370,000.00		\$10.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2003 Infiniti G35 160000 miles Location: 7095 Leewood Forest	\$2,000.00		\$2,000.00	Va. Code Ann. § 34-26(8)
Drive, Springfield VA 22151 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2003 Infiniti G35 160000 miles Location: 7095 Leewood Forest	\$2,000.00		\$10.00	Va. Code Ann. § 34-4
Drive, Springfield VA 22151 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2008 GMC Arcadia 123,000 miles	\$10,000.00	•	\$10.00	Va. Code Ann. § 34-26(8)
Drive, Springfield VA 22151 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2008 GMC Arcadia 123,000 miles	\$10,000.00		\$10.00	Va. Code Ann. § 34-4
Drive, Springfield VA 22151 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	

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De	Jamii W Ezzeddine			Case number (if known)	20-10/33
	Brief description of the property and line on Schedule A/B that lists this property			ount of the exemption you claim  ck only one box for each exemption.	Specific laws that allow exemption
	Dining Set, Tables, Chairs, Beds, Dressers, TV, Electronics, Sofas, Lamps, Living Room Furniture, Bedroom Furniture, Small Household Appliances & Housewares Line from Schedule A/B: 6.1	\$4,250.00		\$4,250.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4a)
	<b>Debtors' Clothing</b> Line from <i>Schedule A/B</i> : <b>11.1</b>	\$650.00		\$650.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(4)
	Rings, Wedding Ring Line from Schedule A/B: 12.1	\$200.00		\$200.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-26(1a)
	Books, Pictures, Small Household Items Line from Schedule A/B: 14.1	\$120.00		\$120.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
	Checking Account: PNC Line from Schedule A/B: 17.1	\$1,800.00		\$1,800.00  100% of fair market value, up to any applicable statutory limit	Va. Code Ann. § 34-4
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3 ■ No ■ Yes. Did you acquire the property covere ■ No ■ Yes	3 years after that for ca	ises fi	ŕ	,

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	0430 20 10700 Kill	Document Page 1	1 of 36	10.00.20 Dec	oc iviaiii
Fill	in this information to identify you				
Deh	tor 1 Jamil M Ezzedd	line			
	First Name	Middle Name Last Name		-	
Deb	tor 2				
(Spot	use if, filing) First Name	Middle Name Last Name		_	
Unit	ed States Bankruptcy Court for the	EASTERN DISTRICT OF VIRGINIA		_	
Cas	e number <b>20-10733</b>				
(if kno	own)			☐ Check	if this is an
				amend	ded filing
∩ff	icial Form 106D				
				_	
Sc	nedule D: Creditors	Who Have Claims Secure	ed by Proper	ty	12/15
is ne		If two married people are filing together, both are cout, number the entries, and attach it to this form.			
1. Do	any creditors have claims secured by	y your property?			
	□ No. Check this box and submit t	his form to the court with your other schedules.	You have nothing else	to report on this form.	
	Yes. Fill in all of the information	•	<b>3</b>		
		below.			
Part	11: List All Secured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As	ly	Value of collateral	Unsecured
		ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this	portion If any
2.1	U.S. Dept. of Housing	Describe the property that secures the claim:	\$94,986.00	\$370,000.00	\$0.00
	Creditor's Name	7095 Leewood Forest Drive Springfield, VA 22151 Fairfax County			
	451 7th Street, SW Washington, DC 20410	As of the date you file, the claim is: Check all that apply.  Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
Who	o owes the debt? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only	An agreement you made (such as mortgage or s	ecured		
	Pebtor 2 only	car loan)			
_	Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
$\square$ A	at least one of the debtors and another	☐ Judgment lien from a lawsuit			

**Second Mortgage** 

■ Other (including a right to offset)

Last 4 digits of account number

☐ Check if this claim relates to a

community debt Date debt was incurred

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Debtor 1 Jamil M Ezzeddine		Case number (if known)	20-10733	
First Name Middle N	Name Last Name			
2.2 Wells Fargo Dealer	Describe the property that secures the	e claim: \$6,500.00	\$10,000.00	\$0.00
Creditor's Name	2008 GMC Arcadia 123.000 mi		<u> </u>	
Ground Criams	Location: 7095 Leewood Fore			
D.O. D. 05044	Drive, Springfield VA 22151	531		
P.O. Box 25341	As of the date you file, the claim is: Ch	neck all that		
Santa Ana, CA 92799-5341	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mo	ortgage or secured		
Debtor 2 only	car loan)	origage or cooured		
Debtor 1 and Debtor 2 only	Ctatutanulian (auch as tay lian mach	oniala lian)		
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mech.☐ Judgment lien from a lawsuit	anics lien)		
☐ Check if this claim relates to a		Car Loan		
community debt	Other (including a right to offset)	Jai Loan		
Date debt was incurred	Last 4 digits of account numbe	er		
Wells Fargo Home				
2.3 Mortgage	Describe the property that secures the	e claim: \$317,107.06	\$370,000.00	\$0.00
Creditor's Name	7095 Leewood Forest Drive			
	Springfield, VA 22151 Fairfax			
P.O. Box 10335	County			
Des Moines, IA	As of the date you file, the claim is: Ch	neck all that		
50306-0335	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_				
Debtor 1 only	An agreement you made (such as mo car loan)	ortgage or secured		
Debtor 2 only	<u> </u>			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mech	anic's lien)		
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)	Mortgage		
community debt				
Date debt was incurred	Last 4 digits of account numbe	er		
All the letter of a contract of	N. I	*440.5	200.00	
If this is the last page of your form, add	Column A on this page. Write that numbe	· · · · ·		
Write that number here:	the donar value totals from all pages.	\$418,5	93.06	
Don't 2: List Others to De Natified fo	an a Dalat That Var. Almanda I inted			
Part 2: List Others to Be Notified for	•			
Use this page only if you have others to be trying to collect from you for a debt you of than one creditor for any of the debts that debts in Part 1, do not fill out or submit the submit that the collection is the submit that the submit the submit that t	owe to someone else, list the creditor in it you listed in Part 1, list the additional o	Part 1, and then list the collection a	agency here. Similarly, if you	have more
Name, Number, Street, City, State &	Zip Code	On which line in Part 1 did you	enter the creditor? 2.3	
Samuel I. White, PC			_	
5040 Corporate Woods Dri	ve	Last 4 digits of account number	· <u> </u>	
Virginia Beach, VA 23452-4	1377			

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Fill in this information to ide		Document Pag	ge 13 of 3	36		
	entify your case:					
Debtor 1 Jamil M	Ezzeddine					
First Name		ddle Name Last	Name			
Debtor 2						
(Spouse if, filing) First Name	Mic	ddle Name Last	Name			
United States Bankruptcy Cou	urt for the: EASTE	RN DISTRICT OF VIRGINIA				
Cana mumban 00 40700						
Case number 20-10733 (if known)					☐ Check	if this is an
,					<del></del>	led filing
						Ū
Official Form 106E/F	-					
Schedule E/F: Cred	litors Who Ha	ive Unsecured Cla	ms			12/15
any executory contracts or unexp Schedule G: Executory Contracts Schedule D: Creditors Who Have eft. Attach the Continuation Page name and case number (if known	s and Unexpired Lease Claims Secured by Pr e to this page. If you h n).	es (Official Form 106G). Do not i roperty. If more space is needed lave no information to report in	nclude any cre I, copy the Par	editors with partially s t you need, fill it out, i	ecured claims that a number the entries in	re listed in n the boxes on the
	RIORITY Unsecured					
<ol> <li>Do any creditors have priori</li> <li>No. Go to Part 2.</li> </ol>	ity unsecured claims a	igainst you?				
_						
Yes.		9-1		and the second		
possible, list the claims in alph	<ul> <li>If a claim has both prionabetical order according</li> </ul>	ority and nonpriority amounts, list t g to the creditor's name. If you ha im, list the other creditors in Part 3	nat claim here a ve more than tw	and show both priority a	and nonpriority amount	ts. As much as
(For an explanation of each ty	pe of claim, see the inst	tructions for this form in the instruc	tion booklet.)			
				Total claim	Priority	
					amount	Nonpriority amount
2.1 Internal Revenue S	Service*	Last 4 digits of account num	ber	\$6,700.00	•	amount
Priority Creditor's Name		_		\$6,700.00	amount	amount
Priority Creditor's Name Centralized Insolve		Last 4 digits of account num		\$6,700.00	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1	ency 9114	_		\$6,700.00	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State	ency 9114 g Zip Code	_	2018		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1	ency 9114 g Zip Code	When was the debt incurred	2018		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State	ency 9114 g Zip Code	When was the debt incurred  As of the date you file, the cl	2018		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch	ency 9114 g Zip Code	When was the debt incurred  As of the date you file, the cl  ☐ Contingent	2018		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only	ency 9114 • Zip Code neck one.	When was the debt incurred  As of the date you file, the cl Contingent Unliquidated	? 2018 aim is: Check a		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only	ency 9114 e Zip Code neck one.	When was the debt incurred  As of the date you file, the cl Contingent Unliquidated Disputed	? 2018  aim is: Check a		amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on	ency 9114 9 Zip Code neck one.	As of the date you file, the composition of the date of the composition of the date of the composition of the date	2018  aim is: Check a	all that apply	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only At least one of the debtor	ency 9114 2 Zip Code neck one.	As of the date you file, the cl Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligation	2018  aim is: Check a  d claim:  ns  bots you owe the	all that apply egovernment	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is fo	ency 9114 2 Zip Code neck one.	When was the debt incurred  As of the date you file, the cl Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligatio Taxes and certain other de	2018  aim is: Check a  d claim:  ns  bots you owe the	all that apply egovernment	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is fo	ency 9114 2 Zip Code neck one.	As of the date you file, the cl Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligatio Taxes and certain other de Claims for death or person	2018  aim is: Check a  d claim:  ns  bts you owe the al injury while yo	all that apply egovernment	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is fo Is the claim subject to offse	ency 9114 2 Zip Code neck one.	As of the date you file, the cl Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligatio Taxes and certain other de Claims for death or person Other. Specify	2018  aim is: Check a  d claim:  ns  bts you owe the al injury while yo	all that apply egovernment	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is fo Is the claim subject to offse	ency 9114 2 Zip Code neck one.	As of the date you file, the classical Contingent Unliquidated Disputed Type of PRIORITY unsecured Domestic support obligatio Taxes and certain other de Claims for death or person Other. Specify Income	2018  aim is: Check a  d claim:  ns  bits you owe the al injury while yo	all that apply egovernment	amount	amount
Priority Creditor's Name Centralized Insolve P.O. Box 7346 Philadelphia, PA 1 Number Street City State Who incurred the debt? Ch Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor Check if this claim is fo Is the claim subject to offse No Yes	ency 9114 2 Zip Code neck one.  hly rs and another or a community debt set?	When was the debt incurred  As of the date you file, the cl Contingent Unliquidated Disputed Type of PRIORITY unsecuree Domestic support obligatio Taxes and certain other de Claims for death or person Other. Specify Income	2018  aim is: Check a  d claim:  ns  bits you owe the al injury while yo	all that apply egovernment	amount	•

Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

**Total claim** 

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1 Jamil M Ezzeddine		Case number (if known) 20-10733	
Barclays Bank Delaware Nonpriority Creditor's Name	Last 4 digits of account number	0331	\$1,735.00
Po Box 8801 Wilmington, DE 19899	When was the debt incurred?	Opened 11/01/13 Last Active 9/18/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
Check if this claim is for a community debt		aration agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharir	a plane, and other similar debte	
☐ Yes	Other. Specify Credit Card	1	
Capital One	Last 4 digits of account number	4318	\$1,248.59
Nonpriority Creditor's Name Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 10/01/13 Last Active 1/13/15	
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Credit Card	<u> </u>	
Credit First/CFNA	Last 4 digits of account number	5145	\$651.78
Nonpriority Creditor's Name Bk13 Credit Operations Po Box 818011	When was the debt incurred?	Opened 7/01/13 Last Active 10/01/15	
Cleveland, OH 44181  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	· · · · · · · · · · · · · · · · · · ·	an and apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	and the angles and the angles angles and the angles angles angles and the angles angles angles and the angles angles angles and the angles angle	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	■ Other. Specify Charge Acc	count	

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Debtor	1 Jamil M Ezzeddine	Ca	ase number (if known) 20-10733	
4.4	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	4420	\$1,243.00
	Po Box 98873 Las Vegas, NV 89193		Opened 3/01/13 Last Active 9/18/15	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	■ Debtor 1 only	Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another☐ Check if this claim is for a community	Type of NONPRIORITY unsecured of ☐ Student loans	laim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.5	First Premier Bank	Last 4 digits of account number	6381	\$1,005.00
	Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104		Opened 12/01/11 Last Active 10/01/15	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	plans, and other similar debts	
	Yes	Other. Specify Credit Card		
4.6	Leewood Forest Homes Nonpriority Creditor's Name	Last 4 digits of account number		\$592.00
	c/o Chadwick Washington 3201 Jermantown Rd., #600 Fairfax, VA 22030	When was the debt incurred?		
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is:	Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured of	laim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separa report as priority claims	tion agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	plans, and other similar debts	
	☐ Yes	■ Other. Specify HOA Fees		

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	6,700.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	6,700.00
					Total Claim
Total	6f.	Student loans	6f.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	6,475.37
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	6,475.37

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jamil M Ezzeddir	ne		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number	20-10733			
(if known)				Check if this is an amended filing

### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Ony		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5	- City		<u> </u>	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

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		Docume	nı raye 10 t	JI 30	
Fill in this	information to identify your	case:			
Debtor 1	Jamil M Ezzeddir	ie			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	rg) First Name	Middle Name	Last Name		
	tes Bankruptcy Court for the:	EASTERN DISTRICT C			
Officed Stat	les bankruptey court for the.	LAGILINI DIGINIOTE	N VIICOINIA		
Case numb	per <b>20-10733</b>				Charlett this is an
(ii Kilowii)					☐ Check if this is an amended filing
0.44					-
	Form 106H				
<u>Sched</u>	ule H: Your Cod	ebtors			12/15
	and case number (if known) you have any codebtors? (If	• •		e as a codebtor.	- ·
■ No □ Yes					
Arizona  No.	a, California, Idaho, Louisiana, Go to line 3.	Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include )
☐ Yes.	. Did your spouse, former spor	use, or legal equivalent live	e with you at the time?		
in line Form 1 out Co	2 again as a codebtor only i 106D), Schedule E/F (Official blumn 2.	f that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street	•	710.0	<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			—	
(	City	State	ZIP Code		

Fill	in this information to identify your c	ase:								
	otor 1 Jamil M Ezz									
	otor 2					-				
Uni	ted States Bankruptcy Court for the	: EASTERN DISTRICT	OF VIRGINIA	A		_				
	ee number 20-10733							ed filing ent showi	ing postpetition	
O	fficial Form 106l						MM / DD/ Y		Tonowing date	•
So	chedule I: Your Inc	ome					WIWI 7 BB7 1			12/15
sup <sub>i</sub> spo atta	is complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, an th you, do no	d your spou ot include ir	use is nform	living vation al	vith you, incl bout your spo	ude info	rmation abou nore space is	t your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-	filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employe				■ Empl	-		
	employers.	Occupation	Installer				Elderly	Care		
	Include part-time, seasonal, or self-employed work.	Employer's name	Bath Fitte	er			Greens	pring V	'illage	
	Occupation may include student or homemaker, if it applies.	Employer's address	7942 Ang Springfie	jus Court Id, VA 221	53				illage Drive A 22150	
		How long employed to	here? 3	8 Months				Year		
Par	t 2: Give Details About Mor	nthly Income								
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have noth	ning to report	t for a	ny line,	write \$0 in the	space. Ii	nclude your no	on-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the inf	formation for	all en	nployers	for that perso	on on the	lines below. If	you need
						For	Debtor 1		ebtor 2 or iling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	6,188.89	\$	1,256.67	_
3.	Estimate and list monthly overt	ime pay.			3	+\$	0.00	+\$	0.00	_
1	Calculate gross Income Add liv	na 2 + lina 3			, [	•	6 199 90	Φ	1 256 67	1

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Jamil M Ezzeddine	_	С	ase number (if kn	own)	20-1	0733		
			_							
					For Debtor 1		For	Debtor 2	2 or	
								n-filing s		
	Cop	y line 4 here	4.		\$ 6,188	.89	\$		256.67	,
F	l int									_
5.		all payroll deductions:	E o		\$ 549		¢		175 00	
	5a. 5b.	Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans	5a. 5b.			.88	\$_ \$		175.93 0.00	_
	5c.	Voluntary contributions for retirement plans	5c.		:	.00	\$ _		0.00	
	5d.	Required repayments of retirement fund loans	5d.		:	.00	\$-		0.00	_
	5e.	Insurance	5e.		·	.00	\$_		0.00	_
	5f.	Domestic support obligations	5f.		:	.00	\$		0.00	
	5g.	Union dues	5g.			.00	\$		0.00	_
	5h.	Other deductions. Specify:	5h.				+ \$ _		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	9	\$ 549	.88	\$_		175.93	<u> </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	5	5,639	.01	\$_	1,0	080.74	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a.		\$0	.00	\$		0.00	<u>)                                    </u>
	8b.	Interest and dividends	8b.		\$ 0	.00	\$		0.00	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$ <b>0</b>	.00	\$		0.00	
	8d.	Unemployment compensation	8d.		·	.00	\$ -		0.00	_
	8e.	Social Security	8e.			.00	\$_		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:				.00	\$		0.00	_
	8g.	Pension or retirement income	 8g.			.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.		\$ 0	.00	+ \$_		0.00	<u> </u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0	.00	\$_		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	5,639.01	+ \$	1	080.74	= \$	6,719.75
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ <u> </u>	3,033.01	.  _	٠,	000.74	_	0,7 13.73
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe				-	Schedule 11.	_	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	6,719.75 ned
12	Do:	you expect an increase or decrease within the year after you file this form	2						month	ly income
13.	<b>■</b>	you expect an increase or decrease within the year after you file this form No.	f							
		Yes. Explain:								

Fill	in this information to identify your case:		1		
			01		
Deb	Jamil M Ezzeddine			k if this is: An amended filing	
	btor 2			A supplement show	ving postpetition chapter
(Sp	ouse, if filing)			13 expenses as of	the following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF VIRO	GINIA	_	MM / DD / YYYY	
	se number 20-10733 (nown)				
O <sup>1</sup>	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.				
	rt 1: Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2.  ☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expen	nses for Separate House	ehold of Debt	or 2.	
2.					
۷.		5 I I I I I		Daniel Lands	Secretaria de la constanta
	Do not list Debtor 1 and Debtor 2.   Yes. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Daughter		13	■ Yes
		_			□ No
		Daughter		16	■ Yes
					□ No □ Yes
					☐ Yes
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unlespenses as of a date after the bankruptcy is filed. If this is a suplicable date.	ss you are using this fupplemental <i>Schedule</i>	orm as a su J, check th	pplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the
the	clude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule</i> fficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgag	e 4. \$		1,930.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		250.00
5.	<ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, such as</li> </ul>	s home equity loops	4d. \$ 5. \$		0.00
J.	Additional mortgage payments for your restuctive, SUCH as	HOLLE EUUITA IDAIIO	J. J		U.UU

Debtor 1	Jamil M Ezzeddir	ne	Case number (if k	nown) <b>20-10733</b>
6. <b>Utili</b>	ies:			
6. <b>G</b> till	Electricity, heat, natu	ıral qas	6a. \$	270.00
6b.	Water, sewer, garba	•	6b. \$	70.00
6c.	-	ne, Internet, satellite, and cable services	6c. \$	360.00
6d.	Other. Specify:	ic, internet, satellite, and capie services	6d. \$	0.00
	and housekeeping	sunnlies	od. \$ 7. \$	1,350.00
	dcare and children's	• •	8. \$	· · · · · · · · · · · · · · · · · · ·
	ning, laundry, and dr		9. \$	250.00
	onal care products a	, -	9. \$ 10. \$	90.00
	•		· —	90.00
	cal and dental exper		11. \$	90.00
	<b>sportation.</b> Include ga ot include car paymen	as, maintenance, bus or train fare.	12. \$	385.00
		reation, newspapers, magazines, and books	13. \$	60.00
		and religious donations	14. \$	0.00
5. Insu		and rengious donations	ιτ. ψ	0.00
		educted from your pay or included in lines 4 or 20		
	Life insurance	oddoled from your pay of moldaed in inico 4 of 20	15a. \$	0.00
	Health insurance		15b. \$	0.00
	Vehicle insurance		15c. \$	150.00
	Other insurance. Spe	ecify.	15d. \$	0.00
	·	es deducted from your pay or included in lines 4 or		0.00
Spec	eify:		16. \$	0.00
	Illment or lease payn		170 ¢	400.00
	Car payments for Ve		17a. \$	400.00
	Car payments for Ve	enicie 2	17b. \$	0.00
	Other. Specify:		17c. \$	0.00
	Other. Specify:		17d. \$	0.00
		y, maintenance, and support that you did not r		0.00
		on line 5, <i>Schedule I, Your Income</i> (Official For te to support others who do not live with you.	11 1061).	0.00
Spec		to support outers will do not live with you.	19.	0.00
	·	nses not included in lines 4 or 5 of this form or		ome
	Mortgages on other		20a. \$	0.00
	Real estate taxes	F F y	20b. \$	0.00
		er's, or renter's insurance	20c. \$	0.00
		, and upkeep expenses	20d. \$	0.00
		iation or condominium dues	20e. \$	0.00
		lation of condominatin dues	20e. \$ 21. +\$	
i. Otile	r: Specify:		21. <del>+</del> φ	0.00
	ulate your monthly e	•		
	Add lines 4 through 2		\$_	5,745.00
22b.	Copy line 22 (monthly	expenses for Debtor 2), if any, from Official Form	106J-2 \$	
22c.	Add line 22a and 22b.	The result is your monthly expenses.	\$ _	5,745.00
:3. <b>Calc</b>	ulate your monthly n	et income.		
		ombined monthly income) from Schedule I.	23a. \$	6,719.75
		expenses from line 22c above.	23b\$	5,745.00
	177	•	_	3,: 13.30
23c.		ly expenses from your monthly income.	220	974.75
	The result is your mo	onthly net income.	23c.  \$	314.13
24. <b>Do</b> v	ou expect an increas	se or decrease in your expenses within the yea	r after you file this form	?
		finish paying for your car loan within the year or do you e		
	ication to the terms of you			
■ N	0.			
ΠY		nere:		

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Fill in this inf	formation to identify your	case:			
Debtor 1	Jamil M Ezzeddin	200			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number	20-10733				
(if known)					Check if this is an amended filing
You must file to btaining mor		ile bankruptcy schedules n connection with a bank	or amended schedules	s. Making a false statemer	nt, concealing property, or rimprisonment for up to 20
S	Sign Below				
Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out	bankruptcy forms?	
■ No					
☐ Yes	s. Name of person				cy Petition Preparer's Notice, I Signature (Official Form 119)
•	enalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules file	ed with this declaration ar	nd
X /s/ Ja	amil M Ezzeddine		x		
	il M Ezzeddine ature of Debtor 1		Signature o	f Debtor 2	
Date	March 31, 2020		Date		

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Fill i	n this inforn	nation to identify you	r case:			
Debt	tor 1	Jamil M Ezzeddi First Name	Niddle Name	Last Name		
Debt	tor 2					
(Spou	se if, filing)	First Name	Middle Name	Last Name		
Unite	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Case	e number	20-10733				
(if kno	wn)				_	Check if this is an mended filing
Off	<u>icial Fo</u>	rm 107				
Sta	tement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/19
infori	mation. If moer (if know)	ore space is needed, n). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup additional pages, write you	
		r current marital statu				
	■ Married □ Not mar					
<b>2.</b>	During the Is	ast 3 years have you	lived anywhere other than	where you live now?		
	_	ast o years, have you	inved any where other than	where you live now.		
	■ No □ Yes. Lis	at all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory co, Texas, Washington and W	
	■ No					
ĺ	_	ake sure you fill out <i>Sch</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Part	2 Explai	n the Sources of You	r Income			
ı	Fill in the tota	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,715.00	■ Wages, commissions, bonuses, tips	\$2,110.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

					Debtor 1			Debto	r 2			
					Sources of income Check all that apply.	(befo	s income re deductions and sions)		es of inc all that a		Gross in (before do and exclu	eductions
			dar year: December 3	31, 2019 )	■ Wages, commissions, bonuses, tips		\$46,607.00		iges, com es, tips	missions,	\$1	15,317.00
					☐ Operating a business			□Ор	erating a	business		
For (Ja	r the ca nuary 1	lend l to [	ar year bef December 3	ore that: 31, 2018 )	■ Wages, commissions, bonuses, tips		\$29,082.00		iges, com es, tips	missions,	\$2	25,000.00
					☐ Operating a business			□Ор	erating a	business		
5.	Include and oth winning	e inco her p gs. If ach so lo	ome regardl oublic benefi you are filir	ess of wheth t payments; ng a joint cas ne gross inco	e during this year or the two er that income is taxable. Ex- pensions; rental income; intel e and you have income that y me from each source separa	amples o rest; divid you rece	of other income are dends; money colle- tived together, list it	alimony; c cted from only once	lawsuits; under De	royalties; ar ebtor 1.	Security, unei nd gambling a	mployment, and lottery
					Debtor 1			Debto				
					Sources of income Describe below.	each (befo	s income from source re deductions and sions)		es of inc		Gross in (before do and exclu	eductions
Par	rt 3:	List	Certain Pay	ments You	Made Before You Filed for	Bankrup	otcy					
6.	_	lo.	Neither De individual p  During the s  No.  Yes	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consume ebtor 2 has primarily consupersonal, family, or househo re you filed for bankruptcy, distance creditor to whom you paieditor. Do not include payment payments to an attorney for the on 4/01/22 and every 3 year	umer del old purpos id you pa id a total nts for do this bank	bts. Consumer deb se." ay any creditor a tota of \$6,825* or more emestic support obli ruptcy case.	al of \$6,82 in one or gations, s	25* or mon more pay uch as ch	re? rments and ild support	the total amo and alimony.	ount you
	<b>■</b> Y	es.			r both have primarily consure you filed for bankruptcy, di			al of \$600	or more?			
			■ No.	Go to line 7								
			□ Yes	include pay	ach creditor to whom you pai ments for domestic support o this bankruptcy case.							
	Credi	itor's	Name and	Address	Dates of payme	ent	Total amount		nt you	Was this	payment for	r

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Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations agent, including one for
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pal	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.	cases, small claims action	s, divorces, collection	on suits, paternity a	ctions, suppor	t or custody
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  ☐ Yes. Fill in the information below.	w.	erty repossessed, f		hed, attached	
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened	d			
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becomes No  Yes. Fill in the details.		luding a bank or fi	nancial institution	, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taken	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possess			efit of creditors, a
Pai	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup  ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					

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			L	ocument	Page 27 01	1 30		
Deb	otor 1	Jamil M Ezzeddine				Case number (i	f known) 20-10733	
14.	_	n 2 years before you filed for bank	ruptcy, d	id you give any	gifts or contributi	ons with a total	value of more than	\$600 to any charity?
	_	No						
		Yes. Fill in the details for each gift or o	contributi	on.				
		s or contributions to charities that	total	Describe what	you contributed		Dates you	Value
		e than \$600 rity's Name					contributed	
		ress (Number, Street, City, State and ZIP Cod	le)					
_								
Part	t 6:	List Certain Losses						
		n 1 year before you filed for bankru mbling?	iptcy or	since you filed f	or bankruptcy, did	d you lose anyth	ning because of the	t, fire, other disaster
		No						
		Yes. Fill in the details.						
		cribe the property you lost and	Descri	oe any insurance	e coverage for the	eloss	Date of your	Value of property
	now	the loss occurred	Include	the amount that i	insurance has paid	List pending	loss	lost
			insuran	ce claims on line	33 of Schedule A/I	B: Property.		
Part	t 7:	List Certain Payments or Transfer	s					
				_				
		n 1 year before you filed for bankru ulted about seeking bankruptcy or				ur behalf pay o	r transfer any prope	rty to anyone you
		de any attorneys, bankruptcy petition				services required	in your bankruptcy.	
			•	•	0 0	·	, , ,	
	□ 1	No						
		Yes. Fill in the details.						
	Pers	on Who Was Paid		Description an	d value of any pro	operty	Date payment	Amount of
	Addı			transferred			or transfer was	payment
		il or website address on Who Made the Payment, if Not `	You				made	
		nan Fisher		\$500.00			February 2020	\$500.00
		7 Chain Bridge Rd., #2		φ500.00			r cordary 2020	ψ500.00
		fax, VA 22030-3308						
	DEC	ΔF		\$30.00			February 2020	\$30.00
		Goliad Street		ψ50.00			1 CDI daily 2020	ψ00.00
	Fort	Worth, TX 76126						
		n 1 year before you filed for bankru ised to help you deal with your cre					r transfer any prope	rty to anyone who
		ot include any payment or transfer tha			nts to your credit	ors:		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,					
		No						
		Yes. Fill in the details.						
	Pers	on Who Was Paid		Description an	d value of any pro	operty	Date payment	Amount of
	Addı			transferred			or transfer was	payment
							made	
18.	Withi	n 2 years before you filed for bankı	ruptov. d	id you sell. trade	e, or otherwise tra	ansfer anv prope	erty to anvone. othe	r than property
	trans	ferred in the ordinary course of you	ur busin	ess or financial a	affairs?			
		de both outright transfers and transfer				security interest	or mortgage on your	property). Do not
	_	le gifts and transfers that you have all	ready list	ed on this statem	ent.			
	_	No						
		Yes. Fill in the details.						

**Person Who Received Transfer** Address

Description and value of property transferred

Describe any property or payments received or debts paid in exchange

Date transfer was made

Person's relationship to you

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Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

19.	beneficiary? (These are often called asset-prote		ny property to a	a self-settle	ed trust or similar device	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and	value of the pro	operty trans	sferred	Date Transfer was made
Pai	rt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and S	torage Uni	ts	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated No	other financial accou	nts; certificate	s of depos		, ,
	Yes. Fill in the details.					
		ast 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year cash, or other valuables?	ar before you filed fo	r bankruptcy, a	any safe de	posit box or other depos	itory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than you	r home within	1 year befo	re you filed for bankrupt	cy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?
Pa	rt 9: Identify Property You Hold or Control fo	r Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any prope	rty you bor	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the proj (Number, Street, City, S Code)		Describe	the property	Value
Pa	rt 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definition	s apply:				
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these states.	air, land, soil, surfac	e water, groun			
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		environmental	law, wheth	ner you now own, operate	e, or utilize it or used
	Hazardous material means anything an enviro hazardous material, pollutant, contaminant, or		as a hazardou	s waste, ha	azardous substance, toxi	c substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Jamil M Ezzeddine Case number (if known) 20-10733

24.	Has any governmental unit notified you that y —	ou may be liable or potentially liable	under or in violation of an environme	ntal law?
	No No			
	Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of ar	ny release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	nistrative proceeding under any envir	onmental law? Include settlements a	nd orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	of the following connections to any	business?
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity, o	either full-time or part-time	
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	utive of a corporation		
	☐ An owner of at least 5% of the voting	or equity securities of a corporation		
	■ No. None of the above applies. Go to Pa	rt 12.		
	☐ Yes. Check all that apply above and fill in	the details below for each business.		
		Describe the nature of the business	Employer Identification number	
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security n	lumber or ITIN.
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement to	o anyone about your business? Inclu	de all financial
	■ No □ Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
	(			

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Case number (if known) 20-10733 Debtor 1 Jamil M Ezzeddine Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jamil M Ezzeddine Signature of Debtor 2 Jamil M Ezzeddine Signature of Debtor 1 Date March 31, 2020 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No

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# United States Bankruptcy Court Eastern District of Virginia

In re	Jamil M Ezzeddine		Case No.	20-10733	
		Debtor(s)	 Chapter	13	

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 3,500.00
	Prior to the filing of this statement I have received \$ 500.00
	Balance Due \$ 3,000.00
2.	The source of the compensation paid to me was:  Debtor    Other (specify)
3.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;  b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;  c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;  d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;  e. Other provisions as needed:  Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services:  Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 31, 2020	/s/ Nathan Fisher
Date	Nathan Fisher 37161
	Signature of Attorney
	Nathan Fisher
	Name of Law Firm
	3977 Chain Bridge Rd., Suite #2
	Fairfax, VA 22030
	(703) 691-1642

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,296 (For all Cases Filed on or after 01/01/2019)

# NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

#### PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

March 31, 2020	/s/ Nathan Fisher	
Date	Nathan Fisher 37161	
	Signature of Attorney	

Fill in this inforr	nation to identify your case:
Debtor 1	Jamil M Ezzeddine
Debtor 2 (Spouse, if filing)	
United States E	Bankruptcy Court for the: Eastern District of Virginia
Case number (if known)	20-10733

Check as directed in lines 17 and 21:							
1	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

#### Official Form 122C-1

### **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 6,189.00 1,009.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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**Jamil M Ezzeddine** 20-10733 Case number (if known) Debtor 1 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6,189.00 + \$ 1.009.00 7.198.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 7.198.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 7,198.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 7,198.00

15a. Copy line 14 here=>

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Debtor 1	Jamil M Ezzeddine	Case number (if known)	20-10733	
	Multiply line 15a by 12 (the number of months in a year).		<u> </u>	12
151	o. The result is your current monthly income for the year for this part	of the form.	\$	86,376.00

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Debto	or 1	Jami	I M Ezzeddine		Case number (if known)	20-10733
16	. Cal	culate t	the median family income that applies to	<b>you.</b> Follow t	hese steps:	
	16a	. Fill in	the state in which you live.	VA		
	16b	. Fill in	the number of people in your household.	4		
	16c	. Fill in t	the median family income for your state and	size of house	ehold.	<sub>\$</sub> 110,000.00
			d a list of applicable median income amount ctions for this form. This list may also be ava			······
17	. Hov	v do th	e lines compare?			
	17a		Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N	•		
	17b	. 🗆	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a	ulation of Yo		
Part	t 3:	Cald	culate Your Commitment Period Under 11	U.S.C. § 132	25(b)(4)	
18.	Cop	y your	total average monthly income from line	1.		\$\$
19.	con	tend tha	e marital adjustment if it applies. If you are at calculating the commitment period under a come, copy the amount from line 13.			our
	19a	. If the i	marital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
	19b	. Subtr	act line 19a from line 18.			\$7,198.00
20.	Cal	culate y	your current monthly income for the year	. Follow thes	e steps:	
					•	\$7,198.00
		Multip	ly by 12 (the number of months in a year).			x 12
	20b	. The re	esult is your current monthly income for the y	ear for this p	art of the form	\$ 86,376.00
	20c	. Copy	the median family income for your state and	size of house	ehold from line 16c	\$ 110,000.00
	21.	How	do the lines compare?			
			ine 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	se ordered b	y the court, on the top of page 1 of this	form, check box 3, The commitment
			Line 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwi	se ordered by the court, on the top of pa	age 1 of this form, check box 4, The
Par	t 4:	Sign	n Below			
	By s	signing	here, under penalty of perjury I declare that	the information	on on this statement and in any attachm	ents is true and correct.
<b>)</b>	( /s/	/ Jamil	I M Ezzeddine			
			Ezzeddine of Debtor 1			
	•	-	ch 31, 2020			
		MM /	/DD /YYYY			
			ked 17a, do NOT fill out or file Form 122C-2			
	If yo	ou chec	ked 17b, fill out Form 122C-2 and file it with	this form. On	line 39 of that form, copy your current r	monthly income from line 14 above.